

ABSTRACT OF SANITARY REPORTS.

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UNITED STATES.

SPECIAL REPORTS.

Influenza and allied diseases.

NEW YORK, N. Y.—Week ended January 18. Eighty-nine deaths from influenza.

BROOKLYN, N. Y.—Week ended January 11. One hundred and ninety-five deaths from pneumonia; 68 from phthisis; 57 from bronchitis.

Week ended January 18. One hundred and sixty-nine deaths from pneumonia; 80 from phthisis; 43 from bronchitis.

BALTIMORE, MD.—Week ended January 18. Sixty-eight deaths from pneumonia; 40 from phthisis; 5 from bronchitis.

BOSTON, MASS.—Week ended January 18. Influenza is still prevalent.

CINCINNATI, OHIO.—Week ended January 18. Phthisis, 17 deaths; bronchitis, 10; pneumonia, 31.

KANSAS CITY, MO.—Week ended January 11. The prevailing disease was pneumonia, with the fatality increased by influenza.

ROCHESTER, N. Y.—Week ended January 18. Five deaths from bronchitis, and 19 from pneumonia.

PROVIDENCE, R. I.—Week ended January 18. The prevailing diseases were influenza and pneumonia. Pneumonia caused 20 deaths; bronchitis, 7; influenza, 2; influenza, with pneumonia or bronchitis, 11; with other causes, 2.

INDIANAPOLIS, IND.—Week ended January 17. The prevailing disease was influenza, which caused 11 deaths.

FALL RIVER, MASS.—Week ended January 18. The prevailing diseases were influenza and whooping-cough, the latter causing 6 deaths.

PORTLAND, ME.—Week ended January 18. Influenza still prevailing. The unexampled death rate for the week shows a large influence from this cause.

BINGHAMTON, N. Y.—Week ended January 18. Influenza is epidemic.

NEWPORT, R. I.—Week ended January 16. The weekly report of the board of health contains the following :

I estimate that fully 15,000 cases of influenza or “la grippe” have occurred in this city, judging from my own observations. With the possible exceptions of 5 of the 15 deaths reported, I believe that all are direct results of some condition of atmosphere which is making the whole world sick. While only 3 are directly charged to “grippe,” still it is evident that some great cause has been at work to kill off this number of people (all but one being over forty years of age, that one a child of two years). Last week we had 1 death, besides a child of seven years. I believe that 1 death to be chargeable to influenza, and possibly the child’s. * * * “La grippe” is still raging, but must soon die out for want of victims.

KEOKUK, IOWA.—Week ended January 11. Several cases of influenza. None serious. Very many cases of acute catarrh, slight bronchitis, general muscular weakness. Some have pains and the unrest of dengue. One invariable symptom is vertigo—swimming in the head, with loss of co-ordination if patient is not very careful. One death reported from “la grippe,” * * * complication pneumonia, and heart disease. Duration of disease two days. * * *

Week ended January 18. Many cases of influenza. Very young persons, under two years, practically exempt. In addition to dizziness there is great muscular soreness and debility. Catarrhal symptoms not uniform; entirely absent in some cases. Paralysis agitans and inability to control muscles of tongue, protruded at side of mouth, and then “wobbles” about. Continued three days in a strong, well nourished man of eighty years. Is recovering. My treatment has been ordinarily a dose or two of Pil. Cath. Comp. U. S. P., then one grain quinine and two grains Dover’s powder every three hours. Let patient eat all he wants. Recovery rapid. Case of membranous croup died in house I had quarantined two months ago for diphtheria. A few cases of varicella. Diphtheria and scarlet fever apparently stamped out.

NEW BERNE, N. C.—Acting Assistant Surgeon N. H. Street, M. -H. S., reports as follows :

JANUARY 17, 1890.

SIR: I have the honor to report that influenza or epidemic catarrh has made its appearance in this city and community, there being one case in the marine hospital at this port. I am glad to state that it seems to be a mild type of the disease, no serious results having as yet been reported.

Yellow fever.

[Bulletin No. 6.]

STATE BOARD OF HEALTH OF FLORIDA,
Jacksonville, January 7, 1890.

Another case of yellow fever has been reported at Key West within the past few days. Therefore, strict vigilance will be exercised by the sanitary inspector at that point over passenger travel and baggage from Key West to the main-land of Florida. All necessary precautions have been taken to prevent the spread of the disease on the Island.

JOSEPH Y. PORTER, M. D.

Secretary and Health Officer Florida State Board of Health.

The period of incubation of yellow fever among passengers and crews of vessels from infected ports.

Dr. C. P. Wilkinson, president of the State board of health of Louisiana, in the New Orleans *Medical and Surgical Journal*, asserts that "lengthy voyages should never be considered in any degree as part of a period of incubation or reckoned in favor of vessels in reducing periods of detention; *but the last exposure of persons on board a vessel from an infected port should invariably be dated only from the hour of completed disinfection, and the probable period of incubation computed from that time.*"

Dr. Wilkinson declares that the crew of a vessel from an infected port may remain entirely free from disease during a very long voyage and may contract yellow fever by exposure to opened holds or baggage after the vessel arrives at quarantine.

He illustrates as follows: "A vessel leaves a port infected with yellow fever. The passengers embark with their baggage and the sailors stow away in their lockers and bags little articles of silk, fancy, woolen, or other goods, to be smuggled and sold at the port of entry. All continues well on board for ten days, and on that day a passenger gets up a trunk and dives down into its contents, seeking some particular garment; or Jack, having at last a moment of leisure, perhaps—and not uncommonly it is the captain—overhauls his stock of purchases. One or two days subsequently the passenger or Jack is laid up with a chill, and four or five days later a saffron-colored body is launched into the deep. An instance of this kind, and it is of every-day occurrence, is invariably set down as twelve days' period of incubation of yellow fever; whereas, in reality, it is only twice that number of hours. Now let us further suppose that there are no passengers on board, the crew is small, and the voyage is a long one from an infected port. An actual case in my knowledge of fifty-two days from Rio; all well on board

while in that infected port and while at sea. While at the quarantine station the sailors' effects were all taken out of bags and boxes by the sailors themselves for fumigation. Forty-eight hours thereafter one man was taken with the initial chill of yellow fever. Is that a period of incubation of fifty-two days or is it one of forty-eight hours? * * * In other words, then, lengthy voyages should never be considered in any degree as part of a period of incubation or reckoned in favor of vessels in reducing periods of detention; *but the last exposure of persons on board a vessel from an infected port should invariably be dated only from the hour of completed disinfection and probable period of incubation computed from that time.* * * *

Examination of carefully-kept quarantine records will reveal that there is no well-established period of incubation of yellow fever covering more than seventy-two hours. It is my belief that, as far as relates to maritime quarantine, three days will soon be considered as the extreme period of yellow-fever incubation."

Danger in water-gas.

[Abstract of a report of A. B. Almon, President, to the Sanitary Protective Association of Newport, R. I.]

The president of the Newport Gas Company having announced the proposed use of water-gas by said company, the Sanitary Protective Association of Newport, R. I., has felt it its duty to inquire as to the conditions and safe-guards under which this dangerous agent is to be used. In response to this inquiry an answer was received from the gas company declining to give any definite information on the subject; stating, furthermore, that the opinion now prevails that water-gas is not more harmful than ordinary coal-gas. This statement is clearly incorrect. Dr. Wolcott Gibbs, of Newport, formerly professor of chemistry in the Lawrence Scientific School of Harvard, comes to the following conclusions from an elaborate series of experiments made in 1884-'85, viz: That when ordinary coal-gas is allowed to escape in a room from an open gas jet it is somewhat difficult to reach the danger line, partly on account of the relatively small percentage of carbonic oxide and partly on account of the natural means of ventilation. In the case of water-gas it is, on the contrary, easy to reach the danger line, from the much larger percentage of carbonic oxide gas which it contains, as well as from its inherent poisonous properties. In all cities in which water-gas has been introduced there has been an extraordinary increase in the number of deaths from gas-poisoning. He concludes by saying that water-gas is to be regarded as extremely dangerous to life.

Prof. Josiah P. Cooke Erving, professor of chemistry at Harvard, concurs in the views expressed above by Dr. Wolcott Gibbs.

Mr. A. R. Carter, secretary board of health of Baltimore, states that the introduction of water-gas into that city in 1881 has increased enormously the deaths from suffocation by illuminating-gas. Before that time the records show but one death from that cause. Since then, and up to December 26, 1889, fifty-four deaths have been reported.

Especial interest centers in the report of Mr. A. B. Almon from the fact that it is the intention of the association to petition the legislature for a law similar to that which is enforced in Massachusetts, which forbids the use of illuminating-gas containing more than 10 per cent. of carbonic oxide.

Reports of States, and Yearly and Monthly Reports of Cities.

CALIFORNIA.—Month of December, 1889. Reports to the State board of health received from ninety-four localities, containing an estimated population of 781,900, give the number of deaths as 963, a percentage of 1.23 per thousand in the month, or an annual mortality at the rate of 14.76, which is a slightly increased rate over previous month.

The mortality from consumption increased during the month to 171.

Pneumonia also increased its mortality to 81 deaths, 45 of which occurred in San Francisco.

Bronchitis caused 38 deaths, which is also an increase over previous month.

Congestion of the lungs was fatal in 9 instances.

Only 2 deaths are reported from whooping-cough—1 in Stockton and 1 in San José.

Diphtheria and croup, collectively, caused 35 deaths, same as in November. Eighteen of these occurred in San Francisco, 3 in Sacramento, 3 in Los Angeles, 2 in Redding, and 1 each in Anaheim, Colfax, Knights Ferry, Lakeport, Modesto, Riverside, San José, Santa Rosa, and Santa Cruz.

Diarrhœa and dysentery were less fatal than usual, 13 deaths only being recorded against them.

Cholera infantum had the small mortality of 7.

Scarlet fever caused but 1 death.

Measles caused no deaths.

Typho-malarial fever is credited with 2 deaths only.

Forty-four deaths are reported from typhoid fever, a slight decrease from previous report, but indicating an extensive prevalence of the disease.

Remittent fever caused 3 deaths.

Cerebral fever was credited with 17 deaths, which is more than double the mortality from this cause as reported in November. The severe cold and rain during the month may have been an exciting cause of the disease.

Cancer is credited with 29 deaths during the month.

Heart disease caused 65 deaths.

Alcoholism was fatal in 4 instances.

The following towns report no deaths: Calico, Downieville, Etna Mills, Elk Grove, Elsinore, Forest Hill, Galt, Jolon, Merced, Ontario, Soquel, Ukiah, and Williams.

Prevailing diseases.—Reports received from one hundred localities indicate an absence of serious epidemic disease within the State. The extreme moisture and cold which prevailed during the month increased in a marked manner the frequency of all affections of the respiratory organs, with a corresponding fatality from consumption, pneumonia, and bronchitis.

Influenza was quite prevalent throughout the State, although not having as yet attained the severity which characterizes the disease as reported from Europe and the Eastern States. It is undoubtedly the same disease, and will become epidemic, although the type may be milder. No deaths from it have yet been reported, but many of our correspondents agree upon the fact that the disease is characterized by that extreme debility which is likely to prove fatal to the debilitated, or those suffering from previous sickness, or in the very aged.

CONNECTICUT.—Month of December, 1889. Reports to the State board of health from 198 cities and towns show a total of 948 deaths during the month. This was 52 more than in November, and 2 less than in December, 1888; and 48 more than the average number of deaths in December for the four preceding years. The deaths included scarlet fever, 6; diphtheria and croup, 74; whooping-cough, 6; enteric fever, 9; consumption, 125; pneumonia, 112; and bronchitis, 37. The *Monthly Bulletin* says:

In the 12 months of the year the number of deaths reported was 12,223, being 346 less than in the corresponding months of last year, and 176 more than the average in the same months in the last four years.

The death rate was 15.1 for the large towns, 14.5 for the small towns, and 15 for the whole State.

The deaths from zymotic diseases were 147, being 15.5 per cent. of the total mortality, as against 18.7 in November.

The following diseases were more fatal in December than in November: Whooping-cough, malarial fevers, consumption, pneumonia, and bronchitis.

The following diseases were less fatal in December than in November: Scarlet fever, cerebro-spinal fever, diphtheria and croup, typhoid fever.

Two cases of small-pox have been reported in Windsor Locks. They were both women employed in the rag-room of the Seymour paper mill, which was without doubt the origin of the disease.

Isolation, vaccination, and disinfection are being thoroughly attended to.

During the last week in the month the pandemic known as "la grippe" appeared almost simultaneously in many parts of the State. Of the 30 sanitary correspondents in widely separated towns, more than

one-half mention its appearance. Since then its general prevalence in every community is too often a matter of personal experience.

Instances of the communication of infectious diseases are reported as follows: Diphtheria in Westbrook and Chatham contracted in Hartford. Scarlet fever brought to Haddam from Middletown and communicated to five other children.

ILLINOIS—*Chicago*.—Month of December, 1889. Population, 1,100,000. Total deaths, 1,579, including croup, 48; diphtheria, 125; scarlet fever, 16; enteric fever, 35; measles, 5; and whooping-cough, 11.

MASSACHUSETTS—*Worcester*.—Month of December, 1889. Population, 82,000. Total deaths, 109, including croup, 4; diphtheria, 4; enteric fever, 1; and whooping-cough, 4.

MICHIGAN.—Week ending January 11, 1890. Reports to the State board of health, Lansing, from 50 observers, indicate that measles, typhoid fever, pneumonia, and dysentery increased, and remittent fever, membranous croup, puerperal fever, typho-malarial fever, cholera morbus, and cholera infantum decreased in area of prevalence.

Diphtheria was reported present during the week at 30 places; scarlet fever at 41 places; enteric fever increased by 39 per cent., and was reported at 25 places; and measles was reported at 8 places.

Detroit.—Month of December, 1889. Population, 250,000. Total deaths, 279, including croup, 21; diphtheria, 23; enteric fever, 2; whooping-cough, 6; and scarlet fever, 7.

MINNESOTA—*Minneapolis*.—Month of December, 1889. Population, 200,000. Total deaths, 179, including enteric fever, 15; diphtheria, 20; scarlet fever, 6; and whooping-cough, 1.

MISSOURI—*St. Louis*.—Month of December, 1889. Population, 450,000. Total deaths, 622, including scarlatina, 18; diphtheria, 33; croup, 2; and enteric fever, 20.

RHODE ISLAND.—Month of December, 1889. Reports to the State board of health from cities and towns representing an aggregate population of 299,320 show a total of 434 deaths, including diphtheria, 15; enteric fever, 9; influenza, 2; measles, 6; scarlet fever, 1; and whooping-cough, 1. The *Monthly Bulletin* says:

The reports from the medical correspondents from the different sections of the State indicate that up to the 18th or 20th of December, the general amount of sickness of all kinds was no larger, and in a considerable proportion of the localities was even smaller, than the general average of the corresponding month in previous years. From the 20th of December onward, there was a steady increase in the total amount of general sickness, in the larger number of the towns, the greater part of which was from the usual diseases of the season and especially nasal and bronchial catarrh. There was also in the last week of the month, in a considerable part of Providence County, a rather sudden and large

prevalence of what has in times past been termed the "influenza," having, however, in many cases some characteristics not usually observed, as, for instance, abdominal pains and diarrhoea, great mental depression and lassitude, and with all the usual manifestations of influenza greatly intensified. At the beginning of the year, the same form of "influenza" increased rapidly, and at this writing, January 11, probably not less than one in every ten of the population in the northern half of the State have felt the influence in a greater or less degree.

During the month of December, according to the returns, pneumonia and bronchitis increased about 50 per cent., and typhoid fever and malarial diseases decreased about 50 per cent. from the previous month. .

Compared with the corresponding month of 1888, pneumonia, bronchitis, and malarial diseases had an equal prevalence, while typhoid fever was largely more prevalent during that month, especially in Providence city.

Other acute diseases had diminished during December, except diphtheria and croup, which prevailed to about the same amount, although prevailing rather more largely in Woonsocket in connection with scarlatina.

Measles were epidemic in Glocester, Pawtucket, and Warwick, in rather mild form.

Whooping-cough was quite prevalent in Pawtucket, Woonsocket, and western Warwick.

Otherwise than above the contagious diseases had very little or no prevalence.

Newport.—Month of December, 1889. Population, 22,000. Total deaths, 21, including none from contagious diseases.

Three cases of enteric fever were reported during the week.

TENNESSEE—*Nashville.*—Month of December, 1889. Total deaths, 82, including enteric fever, 4 ; and whooping-cough, 1.

F O R E I G N .

(Reports received through the Department of State and other channels.)

GREAT BRITAIN—*England and Wales.*—The deaths registered in 28 great towns of England and Wales during the week ended January 4 corresponded to an annual rate of 25.2 a thousand of the aggregate population, which is estimated at 9,555,406. The lowest rate was recorded in Leicester, viz, 14.5, and the highest in Preston, viz, 32.2 a thousand. Diphtheria caused 5 deaths in Salford, 2 in Sheffield, 2 in Plymouth, 2 in Newcastle-upon-Tyne, 2 in Bolton, and 4 in Birmingham.

London.—Two thousand three hundred and seventy-one deaths were registered during the week, including measles, 36; scarlet fever, 15; diphtheria, 32; whooping-cough, 98; enteric fever, 12; and diarrhoea and dysentery, 10. The deaths from all causes corresponded to an annual rate of 28.0 a thousand. Diseases of the respiratory organs caused 843 deaths, and exceeded the corrected average by 301. In greater London 2,921 deaths were registered, corresponding to an annual rate of 26.5 a thousand of the population. In the "outer ring" the deaths included measles, 8; diphtheria, 7; and whooping-cough, 18.

Ireland.—The average annual death rate, represented by the deaths registered during the week ended January 4, in the 16 principal town districts of Ireland, was 30.4 a thousand of the population. The lowest rate was recorded in Sligo, viz, 14.4, and the highest in Lisborn, viz, 43.5 a thousand. In Dublin and suburbs 236 deaths were registered, including measles, 3; enteric fever, 5; whooping-cough, 3; diphtheria, 1; diarrhoea, 3; and dysentery, 1.

Scotland.—The deaths registered in eight principal towns during the week ended January 4 corresponded to an annual rate of 26.5 a thousand of the population, which is estimated at 1,314,274. The lowest mortality was recorded in Greenock, viz, 17.7, and the highest in Glasgow, viz, 30.6 a thousand. The aggregate number of deaths registered from all causes was 686, including measles, 33; scarlet fever, 6; diphtheria, 8; whooping-cough, 22; fever, 7; and diarrhoea, 7.

Gibraltar.—*Additional diseases subject to quarantine regulations.*

GIBRALTAR, December 23, 1889.

With reference to the regulations made on the 23d May, and published on 5th June, 1888, under the provisions of the quarantine order in council, 1885, the board of health has decided that the infectious or contagious diseases referred to in the aforesaid regulations (other than cholera, plague, or yellow fever) should be defined as follows: Small-pox, measles, epidemic rose-rash, scarlet fever, dengue, typhus fever.

The board of health has also decided that the following diseases should be reported by the port surgeon to the sanitary commissioners if landed and taken to any place other than the Colonial or Military Hospital, viz: Chicken-pox, epidemic influenza, typhoid fever, whooping-cough, mumps, dysentery, diphtheria.

By order:

JOHN C. KING,
Secretary to the Board.

NETHERLANDS.—The deaths registered in the principal cities of the Netherlands, having an aggregate population of 1,154,620, during the month of October, 1889, correspond to an annual rate of 17.9 a thousand of the population. The deaths included scarlet fever, 1; measles, 17; croup, 22; whooping-cough, 10; and diphtheria, 34. The lowest rate was recorded in Groningen, viz, 14.3, and the highest in Leiden, viz, 23.

DENMARK—*Copenhagen*.—The United States consul reports, under date of December 21, 1889, that there were 5,793 cases of influenza officially reported, apparently of a very mild form, and that no deaths have occurred from that disease.

SPAIN—*Cadiz*.—The United States consul in his sanitary report for the week ended December 28, 1889, states that there are 20,000 cases of dengue reported in Madrid. He also incloses a clipping from the *Tangier Times* of December 21, as follows:

The Russian authorities of the Caucasus have adopted energetic sanitary measures in view of the great number of persons who have taken refuge in that region from the cholera, which is making great ravages in the country. The opinion that the dengue fever must be considered as the precursor of cholera is the subject of much controversy, being sustained by Dr. Idekaver. Numerous fugitives have arrived at Baku, en route for Persia. The dengue fever has appeared in different cities of France in a mild form. In Rome there are thousands of cases, but they are all mild.

The following is extracted from the *Gibraltar Chronicle* of the 24th December, 1889:

The name of the epidemic at present visiting Spain is now officially given as *trancazo*. It is said to differ from the *grippe* and *dengue* fever in many respects, and especially in that it is a much milder ailment. It is supposed to be non-contagious, and of purely atmospheric origin. Be it what it may, there is no doubt that a very large number of persons in Madrid are suffering from severe influenza, and the attack is attended with a certain amount of fever. In the post-office department the number of *employés* attacked is so large that special arrangements have been made for the delivery of letters, which is much retarded. One popular minor theater has been closed because all the members of the company are said to be sick. In the Theatre Royal, too, the performances have been much curtailed in the last week, and only what

may be called scratch operas have been given, in consequence of the illness of the leading artistes.

BRAZIL—Bahia.—The United States consul, in his dispatch dated December 10, 1889, says :

I have the honor to report the health of the city good, with the exception of a few cases of small-pox. The number of cases have, however, diminished since my last dispatch on this subject, on October 21. There is not a case of yellow fever throughout the city, nor is any case reported from any part of the state.

The drouth prevails to a considerable extent in some of the towns in the interior south of this city. Petitions for aid are daily sent to the governor of the state. Abundant rains have fallen within the past four days, however, which will no doubt prove a great blessing to the drouth-stricken districts.

YUCATAN—Merida.—The United States consul reports, under date of December 23, 1889, that “the influenza, known as *la grippe*, is increasing in its effects, both among the indigenous and white race.”

Rio de Janeiro.—For the week ended December 21, 1889, there were 273 deaths reported, including yellow fever, 12 ; small-pox, 23 ; enteric fever, 8 ; and typhus, 9.

DUTCH GUIANA—Paramaribo.—Month of November, 1889. Seventy-four deaths were reported in a population of 27,752, none of which were from contagious diseases.

CUBA—Havana.—The United States sanitary inspector reports 454 deaths during the month of December, 1889, including yellow fever, 15 ; enteric fever, 8 ; so-called pernicious fever, 2 ; diphtheria, 4 ; and glanders, 1.

Five of the 15 deaths from yellow fever occurred in the military hospital, while the remaining 10 were among civilians in different parts of the city.

During the week ended January 9, there were 2 deaths from yellow fever.

THE PREVAILING EPIDEMIC.

Dr. De Fournes, in the Journal d'Hygiene, Paris, January 2, 1890.

[Translated for this Bureau.]

As might have been easily foreseen, the epidemic of influenza continues its peregrinations through the several quarters of the city, preserving always its essential characteristics of sudden outbreak, brief duration, and extreme benignity.

As was observed by Professors Zdekauer at St. Petersburg, Leyden, and Berlin, the disease ordinarily presents itself under the three following-named forms :

1. Nervous or neuralgic form, which comes on suddenly with intense pain in the back; high fever, with extreme agitation and tendency to syncope.

2. Catarrhal form, following more directly the ordinary course of the seasonable colds.

3. Gastric form, with predominance of constipation and hemorrhoidal flux.

With regard to effective treatment, the majority of practitioners confine themselves to three methods: By sudorifics, sulphate of quinine, and antipyrine, in moderate doses.

Under these circumstances we can only deplore the clamor raised about this disease, thanks to the custom of interviewing, which constitutes, to speak plainly, one of the calamities of our times, in view of the fact that its immediate consequence is to enervate the system, depress the energies, and engender fear and pusillanimity.

Paris has passed at other epochs through periods of excessive morbidity and desolating mortality; but at such times our great practitioners and illustrious masters have been careful not to confide to the first reporter premature facts, chance valuations, and hypothetical deductions.

To-day every important journal which has the ambition to be and to appear to be well informed applies to a medical celebrity, and at a sitting held in a comfortable chimney corner, installed in a luxurious arm chair and discussing an excellent cigar, the young reporter writes the precious consultation from the master's dictation. And as all the medical authorities of Paris have at their disposal original theories and personal opinions, it follows that in a few days the public mind is confused with a medley of opposite opinions and advice.

How could it be otherwise, when an analogous situation is created in the full academy of medicine?

In the meeting of December 17, M. Proust introduced the subject of the dengue of the East. This communication, announced eight days in advance by all the journals of Paris and the provinces, should have thrown a vivid light on the situation.

In reality, each academician expressed his private opinions, and M. Proust had no hesitation in declaring that "to be in a position to formulate the diagnosis of dengue it would be necessary to witness the complete evolution of the epidemic."

We quote:

M. Proust—"The epidemic now prevailing at Paris presents none of the classic characteristics of grippe. It belongs to the nervous form of influenza, but does not present the phenomenon of dengue fever."

M. Brouardel—"I state that the epidemic is very benignant, and analogous to that observed in other cities. In my opinion, we are treating an epidemic of grippe, in spite of the absence of pulmonary catarrh."

M. Rochard—"There is no confusion possible between grippe and dengue—the first ravages the North, the second the South."

M. Leon Colin—"I coincide entirely with the diagnosis of grippe given to the epidemic; it is analogous to former epidemics."

M. Dujardin Beaumetz makes serious reserves: "The phenomena which we observe to-day are so various that we can not say that we have to deal with a type of grippe."

M. Bucquoy calls the present epidemic "influenza," because this title prejudices nothing. Eight days ago he thought himself in the presence of grippe, but to-day he recognizes that "it is not the grippe as we understand it," and he asks if "it is not dengue modified by a northern climate?"

M. Leroy de Méricourt protests against the word influenza, "which is foreign and means no more than grippe."

M. Germain See recognizes that the malady in question is catarrhal fever—that is to say, old-fashioned grippe. Catarrhal pneumonia, in his opinion, occurs very frequently in the course of influenza:

"What is the nature of this pneumonia? Is it due to pneumococcus, or produced under the influence of a specific germ?"

"Experiments are being made at St. Petersburg to demonstrate and define the action of this specific germ.

"If these researches have any result we will hereafter have to be very careful not to attribute to the grippe the benign character generally accorded to it.

"As an infectious miasmatic disease it will hereafter command a reserved prognosis."

M. Bouchard, with clearness and precision, differentiates the two affections:

"Dengue is an affection which attacks everybody; it is contagious; it follows the route of human communication; it is spreading undeniably.

"Grippe, in my opinion, is not primarily contagious. Indeed, grippe attacks thousands of individuals day after day, at points extremely removed. *It is due to atmospheric conditions.*"

We are entirely of M. Bouchard's opinion.

The study on dengue by our collaborator M. Fernand Roux (No. 685), and the article on influenza by our editor-in-chief (No. 691), lead us naturally to this conclusion.

MORTALITY TABLE—FOREIGN CITIES.

Cities.	Week ended.	Estimated population.	Total deaths from all causes.	Deaths from—								
				Cholera.	Yellow fever.	Small-pox.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.	Whooping-cough.
London.....	Dec. 28.....	5,642,015	2,105				2	13	19	40	34	
Glasgow.....	Dec. 28.....	545,678	296					6	1	5	13	7
Warsaw.....	Dec. 21.....	446,770	354			18			6	10		
Amsterdam.....	Dec. 28.....	399,051	190					2		7		
Copenhagen.....	Dec. 21.....	307,000	180					2	3	6		
Palermo.....	Dec. 21.....	250,000	94									
Palermo.....	Dec. 28.....	250,000	99			1						
Bristol.....	Dec. 28.....	232,248	94						1	1		
Bristol.....	Jan. 4.....	232,248	116									
Belfast.....	Dec. 21.....	229,622	136					9				
Genoa.....	Dec. 28.....	180,407	121			1	2			2		
Trieste.....	Dec. 21.....	158,054	92			1		1		1		
Stuttgart.....	Dec. 28.....	125,510	43							2		
Barmen.....	Dec. 28.....	109,000	44				1					
Cadiz.....	Dec. 28.....	57,157	63									
Merida.....	Nov. 25.....	47,448	59									
Merida.....	Dec. 2.....	47,448	52									
Merida.....	Dec. 9.....	47,448	61									
Merida.....	Dec. 16.....	47,448	47									
Merida.....	Dec. 23.....	47,448	62				1					
Merida.....	Dec. 30.....	47,448	62									
Vera Cruz.....	Nov. 14.....	23,800	29									
Kingston, Can.....	Jan. 10.....	18,284	11									

JOHN B. HAMILTON,

Supervising Surgeon-General, U. S. Marine-Hospital Service.